

ONE HUNDRED SIXTEENTH CONGRESS
Congress of the United States
House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

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March 18, 2019

Dr. Nancy Messonnier
Director
National Center for Immunization and Respiratory Diseases
Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30329

Dear Dr. Messonnier:

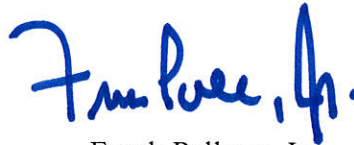
Thank you for appearing before the Subcommittee on Oversight and Investigations on Wednesday, February 27, 2019, at the hearing entitled, "Confronting a Growing Public Health Threat: Measles Outbreaks in the U.S." We appreciate the time and effort you gave as a witness before the Subcommittee on Oversight and Investigations.

Pursuant to Rule 3 of the Committee on Energy and Commerce, members are permitted to submit additional questions to the witnesses for their responses, which will be included in the hearing record. Attached are questions directed to you from certain members of the Committee. In preparing your answers to these questions, please address your response to the member who has submitted the question and include the text of the member's question along with your response. Because you have been asked questions from more than one member of the Committee, please begin the response to each member on a new page.

To facilitate the printing of the hearing record, your responses to these questions should be received no later than the close of business Monday, April 1, 2019. As previously noted, this transmittal letter and your responses, as well as the responses from the other witness appearing at the hearing, will all be included in the hearing record. Your written responses should be emailed to Jourdan Lewis with the Committee staff at jourdan.lewis@mail.house.gov. Please provide your response in a single Microsoft Word formatted document, as well as a PDF document.

Thank you for your prompt attention to this request. If you need additional information or have other questions, please contact Jourdan Lewis at (202) 225-2927.

Sincerely,

A handwritten signature in blue ink that reads "Frank Pallone, Jr." with a stylized flourish at the end.

Frank Pallone, Jr.
Chairman

Attachments

cc: Hon. Greg Walden, Ranking Member
Committee on Energy and Commerce

Hon. Diana DeGette, Chair
Subcommittee on Oversight and Investigations

Hon. Brett Guthrie, Ranking Member
Subcommittee on Oversight and Investigations

The Honorable Frank Pallone Jr. (D-NJ)

1. This year marks the 25th anniversary of the Vaccines for Children (VFC) program, which ensures all children are guaranteed life-saving vaccines regardless of their parent or guardian's ability to pay. According to National Immunization Survey data from CDC, however, there are growing disparities in childhood vaccination rates based on socioeconomic status, whether a child is privately or publicly insured, and whether a child lives in a rural area. What can we do to resolve access issues and ensure we do not lose any of the amazing progress we've made through VFC?
2. Planning for Health People 2030, the national health promotion and disease prevention objectives for the next decade, is now underway. How can immunization play a role in long-term planning for public health goals?
3. While national vaccination rates remain high, according to CDC data from 2017, the estimated MMR vaccination coverage among 13 to 17-year-old young people ranged from 77.8% to 97.0% across states and local counties in the country. Does CDC assess these data and develop an annual map of vaccination rates in the United States by county in order to identify areas requiring further public health engagement, or for forecasting purposes to identify potential geographic areas where outbreaks of vaccine preventable disease could be most likely?
4. According to the Pew Research Center, 7 in 10 adults in the United States look online for health information. Has CDC previously engaged with or plan to directly engaged with internet, digital, or social media stakeholders, such as Amazon, Facebook, Instagram, Pinterest, Reddit, Twitter, Yahoo, or others on the issue of immunization and their respective policies regarding the promotion or proliferation of anti-vaccine media?

The Honorable Jan Schakowsky (D-IL)

1. When outbreaks occur, our most pressing concern is often an immediate response. However, I believe that we also must reflect on our nation's progress in prevention of vaccine preventable diseases. The Department of Health and Human Services (HHS) Healthy People objectives for immunization and infectious disease are a cornerstone for federal, state, and local efforts to protect against vaccine preventable conditions across the lifespan.

I was surprised to learn that the draft Healthy People 2030 objectives include very few immunization objectives in total. At a time when we are seeing increased outbreaks of diseases that were already virtually eliminated in this country, could you explain the rationale behind the reduction in immunization objectives in the draft Healthy People 2030 framework? Do you plan to restore these objectives moving forward?

The Honorable Brett Guthrie (R-KY)

1. In May 2015, the journal Science published a report in which researchers found that the measles infection can leave a population at an increased risk for mortality from other diseases for two to three years. Besides this report, is there evidence that measles increases susceptibility to other infections?
2. What are antigens? How much are used in MMR vaccine? How does that small amount compare to the antigens that are encountered in the environment?
3. Is ensuring high vaccination rates a federal responsibility at all or does ensuring adequate vaccination coverage just a state issue?
4. At what point would exemptions from vaccination become a federal issue?
5. What is your professional judgment of the likely public-health impact of state vaccination exemptions based on personal or professional beliefs?
6. What is the definition of an outbreak?
7. When measles spreads in a locality that is under-vaccinated, does the spread only stay in that pocket of under-vaccination?
8. How does the CDC determine the rates of non-vaccination and the reasons for non-vaccination?
9. How does the CDC support state and local health departments to contain measles outbreaks?
10. What is involved with contact tracing in a measles outbreak?
11. What resource burdens are imposed on state and local health departments to contain a measles outbreak?
12. Are more federal resources needed to help support the state and local response?
13. As you may know, the Washington Poison Center was activated by the Washington State Department of Health (DOH) in mid-January to take calls on behalf of Clark County Public Health from both the public and healthcare facilities related to the measles outbreak. The Clark County Public Health Measles Hotline number is forwarded to the Washington Poison Center, and thus far, its personnel have taken a total of 1,162 calls on this matter. The measles hotline is staffed 24/7/365, and these calls are in addition to the average 175 toxicology calls received on a daily basis.

To adequately address the significant volume of incoming measles calls, the Washington Poison Center leadership developed an innovative process to recruit healthcare and medical students to serve as on-call contractors to assist with measles-related calls. Within 36-hours of project conception, 50 students from the fields of pharmacy, nursing, and naturopaths were recruited, contracted, and trained by the center's toxicology professionals. This approach has received accolades from the state Secretary of Health, the state Office of Emergency Preparedness and Response, and numerous state legislators.

The University of Washington School of Pharmacy, Nursing, and Public Health, as well as Bastyr University, played an integral role in addressing this public health outbreak. Do you believe it is important to have an established CDC training program for these types of students so that there will be a team of people ready to be activated quickly in times of crisis? Are there resources that could be activated to provide this curriculum?

The Honorable Michael C. Burgess, M.D. (R-TX)

1. What safety monitoring systems are in place to ensure that the vaccines on the Advisory Committee on Immunization Practices (ACIP)-recommended schedule are not causing a lot of side effects?
2. Why is it important that vaccines are administered on schedule according to CDC/ACIP guidelines?
3. What is the impact of outbreak response on the ability of state and local public health officials to perform routine public health functions?
4. Why is it important to eradicate infectious diseases like measles? Couldn't we just have low levels of circulating disease?
5. The federal government is working to develop objectives for the Healthy People 2030 goals; how can immunization best be positioned within these goals to maximize national and individual protection from infectious diseases?